



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY MEDICAL COMMAND
2050 WORTH ROAD
FORT SAM HOUSTON, TEXAS 78234-6000

MCCH

9 April 2007

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: U.S. Army Medical Command Chaplain's CY 2007 Training Guidance for Religious Support

1. References.

- a. AR 165-1, Chaplain Activities in the United States Army, 25 March 2004.
- b. Joint Pub 1-05, Religious Support in Joint Operations, 9 June 2004.
- c. CJCSM 3500.04C, Universal Joint Task List, 1 July 2002.
- d. FM 1-05, Religious Support, April 2003.
- e. FM 7-15, The Army Universal Task List, August 2003.
- f. Memorandum, HQ, USA MEDCOM, MCOP-O, 2 October 2006, subject: US Army Medical Command FY07 Command Training Guidance.
- g. The Army Chaplaincy Strategic Plan, DACH-PPDT, 4 August 2004.

2. Purpose. The purpose of this guidance is to focus MEDCOM Unit Ministry Team (UMT) Religious Support (RS) planning, training, and execution for CY 2007 in support of the Global War on Terrorism (GWOT), and the Army Campaign Plan and is applicable to all MEDCOM UMT personnel.

3. General. MEDCOM UMTs serve Army medicine across a broad spectrum. They provide RS in medical treatment facilities, Regional Medical Commands, installation level, institutional school, and research settings.

- a. The MEDCOM Mission and Mission Essential Task List (METL).

(1) MEDCOM Mission: To provide medical readiness for the US Army by protecting a healthy and protected force, deploying the medical force and managing the care of Soldiers, their dependents, and beneficiaries.

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(2) MEDCOM METL.

(a) Provide trained and ready Soldiers to support worldwide contingency operations.

(b) Provide medical, dental, and veterinary healthcare and services at specified operational sites in conjunction with beneficiary healthcare.

(c) Maintain and project the continuum of healthcare resources required to provide for the health of the force.

b. According to FM 7-15, The Army Universal Task List, the UMT has one METL task, i.e. "Provide Religious Support" with four supporting tasks.

(1) Provide Religious Support.

(a) Conduct Religious Services.

(b) Provide Religious Care and Counseling.

(c) Advise on Religious, Moral, and Ethical Issues.

(d) Conduct Religious Support Activity Training.

c. In order to provide RS, MEDCOM must continue to grow and develop UMT leaders to provide quality RS to patients, staff, and family members. The quality of RS we provide in both TDA healthcare facilities and deployed TOE medical units depend on high-quality training.

4. Training. During CY 2007, all MEDCOM UMT personnel should attend at least one annual training event approved by the MEDCOM Chaplain.

a. Chaplains. The annual requirement to attend training ensures quality RS and maintains competencies. Many Chaplains require this annual training to retain certification of their clinical and/or denominational credentials. Chaplains at every level should attend one professional short course each year. Chaplains on SMART teams will attend training IAW SMART team requirements as described in MEDCOM Regulation 525-4, Medical Emergency Management, and MEDCOM PAM 525-1, Medical Emergency Management Planning.

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b. Chaplain Assistants. Chaplain Assistants (56M) usually come to MEDCOM with little or no training in the clinical environment. In order to provide quality RS throughout MEDCOM, training is needed for Chaplain Assistants at the MEDDAC and MEDCEN levels. Supervisors should schedule Chaplain Assistants for training at the Emergency Medical Ministry Course within six months of arrival to MEDCOM. Chaplain Assistants on SMART-PC teams will attend the Critical Incident Stress Management Short Course and required training IAW SMART team requirements as described in MEDCOM Regulation 525-4, Medical Emergency Management, and MEDCOM PAM 525-1, Medical Emergency Management Planning.

c. Approved Training. The following courses are approved. Other training may fulfill the training requirement, but must be approved by the MEDCOM Chaplain.

(1) The AMEDDC&S' Emergency Medical Ministry Course, Combat Medical Ministry Course, and Professional Post-Graduate Short Courses, e.g. Medical Ministry Critical Event Management, Medical Ministry Trauma Recovery Group Dynamics, Medical Ministry Spiritual Health, and Medical Ministry Substance Abuse.

(2) The MEDCOM Chaplaincy Senior Leader Training Conference.

(3) Relevant DACH sponsored courses.

5. We remain a Nation at war. Our task is to provide Soldiers with comprehensive, quality RS throughout MEDCOM while continuing to provide comprehensive, quality RS to MEDCOM's entire beneficiary population.

6. POC is CH (MAJ) Scott F. Jones, scott.jones@amedd.army.mil, DSN 471-6140 or COM (210) 221-6140.



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Command Chaplain

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